



Application No. (if known): 10/535,351

Attorney Docket No.: 58398 (52607)

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Transmittal (1 page)

Fee Transmittal (1 page)

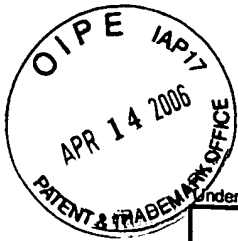
Two Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)

Response to Notice to File Missing Parts of Application (2 pages)

Combined Declaration and Power of Attorney (4 pages)

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PTO/SB/21 (09-04)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/535,351-Conf. #7060
	Filing Date	May 18, 2005
	First Named Inventor	Samuel R. Denmeade
	Art Unit	N/A
	Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	Attorney Docket Number	58398 (52607)

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): Combined Declaration and Power of Attorney Return Receipt Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	EDWARDS ANGELL PALMER & DODGE LLP		
Signature			
Printed name	Jonathan M. Sparks, Ph.D.		
Date	April 14, 2006	Reg. No.	53,624



FEE TRANSMITTAL For FY 2006		Complete if Known			
		Application Number	10/535,351-Conf. #7060		
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	May 18, 2005		
		First Named Inventor	Samuel R. Denmeade		
		Examiner Name	Not Yet Assigned		
		Art Unit	N/A		
TOTAL AMOUNT OF PAYMENT		(\$)	290.00	Attorney Docket No.	58398 (52607)

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>04-1105</u> Deposit Account Name: <u>Edwards Angell Palmer & Dodge LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
						Fee (\$)	Small Entity Fee (\$)
Fee Description							
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
75		- 75 =	x	=	Fee (\$)		Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
2		- 3 =	x	=			
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)	
		- 100 =	/50 (round up to a whole number) x		=		
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge) 225.00 Extension for response within second month						225.00	
205.00 Surcharge-Late oath or declaration						65.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	53,624
Name (Print/Type)	Jonathan M. Sparks, Ph.D.	Telephone	(617) 439-4444
		Date	April 14, 2006

04-17-06



Docket No.: 58398 (52607)
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Samuel R. Denmeade et al.

Application No.: 10/535,351

Filed: May 18, 2005

For: ACTIVATION OF PEPTIDE PRODRUGS BY
HK2

Confirmation No.: 7060

Art Unit: N/A

Examiner: Not Yet Assigned

**NOTIFICATION OF MISSING REQUIREMENTS UNDER 35 U.S.C. 371 IN THE
UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US)**

MS Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Notification of Missing Requirements Under 35 U.S.C. 371 in the United States Designated/Elected Office (DO/EO/US) mailed December 16, 2005, Applicant respectfully submits a Combined Declaration and Power of Attorney, a Petition for Extension of Time, and the appropriate fees.

Please charge our Deposit Account No. 04-1105 in the amount of \$290.00 covering the fees set forth in 37 CFR 1.17(a)(2) and 1.16(f). The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by

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02 FC:2051 65.00 DA

this firm) to our Deposit Account No. 04-1105, under Order No. 58398 (52607). A duplicate copy of this paper is enclosed.

Dated: April 14, 2006

Respectfully submitted,

By 

Jonathan M. Sparks, Ph.D.

Registration No.: 53,624

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